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## POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3,73(b). I hereby appoint: Practitioners associated with the Customer Number: 64128 Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used): Registration Name Number Number as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(h) to: IX I The address associated with Customer Number: 64128 OR Firm or Individual Nam Address City State Zip Country Telephone Assignee Name and Address: Fortinet, Inc., 1090 Kifer Road, Sunnyvale, CA 94086 A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose sugapture and title is supplied below is authorized to act on behalf of the assistnee Signature 9,2006 Name Todd Nelson Telephone 408-486-7803 Title Vice President of Legal and General Counsel. Fortinet. Inc. The conductor of information is required by 37 CPR 131, 132 and 133. The information is regalant by actions or retain a parent by the public which is to the (and the 1367 for the making to the public which is to the (and the 1367 for the making to the 1367 for the making the 1367 for the

comments on the amount of time you require to complete the form and/or suggestions for reducing this teartier, should be sent to the Chall Information Officer.

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